PATENT APPLICATION SERIAL N	0
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## U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

00000044 230035 10781448 02/24/2004 CCHAU1

01 FC:1001 02 FC:1201 03 FC:1202

770.00 OP 110.00 OP

62.00 DA 612.00 DA

05/19/2004 HMDHAMM1 00000002 230035 10781448

01 FC:1202

18.00 DA

PTO-1556 (5/87)

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL EI	YTITY		OTHER	THAN
(Column 1) (Column 2)							• I	TYPE [		OR	SMALL	
TOTAL CLAIMS			55					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
07	TAL CHARGEA	BLE CLAIMS	S minus 20= ' (			5		X\$ 9=		OR	, X\$18≃	630.0
INDEPENDENT CLAIMS S				S =   A				X43=		OR	X86≈	1720
MULTIPLE DEPENDENT CLAIM PRESENT								+145=			200	1700
* If the difference in column 1 is less than zero, enter "0" in					"0" in c	olumn 2	į	TOTAL		OR	+290=	
CLAIMS AS AMENDED - PART II								TOTAL .	L	OR	TOTAL	1572
(Column 1) (Column 2)						(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	<u>.</u>	CLAIMS REMAINING AFTER AMENDMENT	HIGHE NUMB PREVIOU PAID F		BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	##	·	<b>.</b>		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	CLAIM	<u> </u>		X43=		OR	X86=	
	, , , , , , , , , , , , , , , , , , , ,	TOTAL COLUMN	JETH CE DEF	CHOCKI	CLATIVI	ال_ا	' [	+145=		OR	+290=	
						٠.		TOTAL ADDIT, FEE			TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)									4	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		= .	]	X43=		OR	X86=	·
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		J	.446				·
							L	+145≡ TOTAL		OR	+290=	
·							٠,	TOTAL ODIT. FEE	<del></del>	OR	TOTAL ADDIT. FEE	
_		(Column 1) CLAIMS	·	(Colun		(Column 3)	1	•				
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									· ·	OR	7,002	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290=	· · · · · · ·
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE ADDIT. FEE												
•	The *Highest Num	nber Previously Pai	d For" (Total or	Independe	nt) is the	highest number	r lour	nd in the app	opriale box	in colu	ιπα 1,	